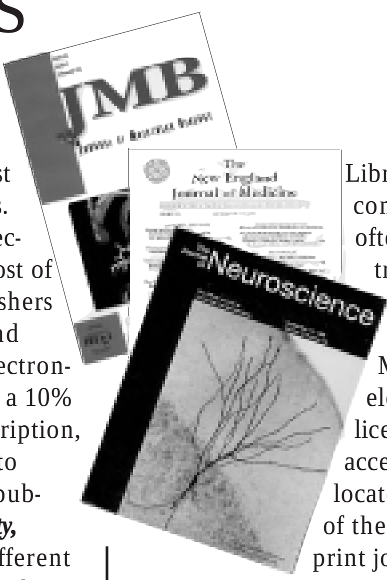
Inside Information
TOOLS FOR THE PRESENT & FUTURE

VOLUME 7, NUMBER 2 FALL 2000

CONTRACTS, COPYRIGHT, AND COST-NEGOTIATING E-JOURNALS



A researcher sits in her office doing an Ovid MEDLINE search, and she finds a reference to highly relevant article in the ***Journal of Biological Chemistry***. The abstract provides a good summary, but she really needs to read the full article. Not too long ago, this would have necessitated a trip to the Library to find the journal and photocopy the needed article. But today, the researcher clicks on the “OpenLink Full Text” hotlink in the MEDLINE record, and within a few seconds, the full-text of the JBC article is on the computer screen in front of her. She thinks to herself, “This is GREAT! I wish a lot more journals were free and online like this one!”

The Library’s electronic journal strategy attempts to make this scenario one that is often repeated throughout the UVA Health System. Our goal is to make highly relevant journals available wherever they are needed, at home, in an office, or on a busy patient floor in the hospital. We are successful when we can make high-impact electronic journals easily accessible, and barrier-free, but that is the only thing “free” about our electronic journal collection!

For 2001, the Library will spend approximately $1 million on journal subscriptions, which includes the cost of electronic access to many titles. For many journals, the fee for electronic access is included in the cost of a print subscription. Some publishers have separate pricing for print and electronic access. Charges for electronic access can vary from as little as a 10% surcharge on top of a print subscription, to a site-license fee costing close to $10,000.00 for the four journals published by Cell Press ***(Cell, Immunity, Molecular Cell, Neuron)***. These different pricing schemes partially explain why we offer electronic access to a less-used journal like ***Yeast***, but not to the high-demand journal ***Cell***.

Cost is not the only barrier that the Library must deal with when trying to provide wider access to electronic journals. Unlike our print subscriptions, which we buy and then own, electronic journals requires the University to negotiate a separate license (even if we subscribe to the print journal) which grants us access to electronic content under the specific terms of the license. Some publisher’s licenses contain terms that place unreasonable restrictions on access, forbid inter-library loan privileges granted by current copyright laws, or require the Library to agree to conditions that are often out of our control. Until recently, the American Society for Microbiology’s electronic journals license restricted access to computers located within the walls of the Library where the print journal was housed! Fortunately, this restriction has been dropped from their current license. ***Nature*** recently introduced a new electronic access policy that allows individual subscribers immediate access to the full content of this weekly journal, while institutional subscribers have immediate access to ONLY the peer-reviewed articles. The publisher of ***Nature*** places a 12-week embargo on Opinion, News, Correspondence, Commentary, Special Essays, and all other content. This embargo will require users who need immediate access to this material to either maintain a personal subscription, or come to the Library for the current print copy.

In general, the Library negotiates

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licenses that allow access to electronic journals from any machine on the UVA network, including off-site access through the University's proxy server. This type of access validates the user through the IP address of the machine they are using, rather than requiring users to have a username and password to gain access.

Another important issue the Library faces in licensing electronic journals is how they will be archived, and who will maintain the archives? Up to now, the Library has maintained a print subscription in addition to licensing electronic access, which provides an ongoing archive of print material. As the cost of biomedical journal subscriptions continues to increase at an average annual rate of about 14%, we cannot continue to maintain our current print subscriptions (approximately 1650 titles), and pay for duplicative electronic access. Yet, until the issue of electronic archiving and perpetual access to those archives is more fully resolved, there will not be a wholesale cutting of print subscriptions in favor of electronic ones.

The Library currently has licensed 463 electronic journals, including 120 of the 200 most used print journals in our collection. All of these electronic journals are all linked from the journal record in WebCat, as well as an alphabetic list of titles (**http://hslnet.med.virginia.edu/ejrnl.html**) on our web page. Many of these are also linked from citations in the Ovid MEDLINE, PsycInfo, and CINAHL (Nursing) databases. Our goal is to provide electronic access to all of the top 200 most used print journals, and we are presently negotiating licenses with Cell Press, American Society for Microbiology, Company of Biologists, Nature Publishing Group and ***Nature***. Any suggestions for additional electronic journals can be sent to Jonathan Lord, Assistant Director for Collection Development, at JonLord@virginia.edu, or 924-0059. ■

2001 Subscription Cuts

In our annual review of journal subscriptions for renewal in 2001, the Library has identified a number of low-use, high-cost per use titles that we will cut next year (see accompanying table) in order to free up funds for a number of new subscriptions. While three years of use statistics were examined for these titles, we have only included last year's figures. If you have any comments or questions about the proposed cancellations, please contact Jonathan Lord at 924-0059 or e-mail jml4s@virginia.edu, by November 1st. If you believe a title should not be canceled, please suggest an alternative title in your field currently owned by the Library that we can cancel in its place.

Journal Title	Uses 99/00	Cost 2000	Cost per use	Cost 2001
Advances Mind-Body Medicine	0	155.94	155.94	146.37
Advances in Enzyme Regulation	3	691.00	230.33	691.00
AUA Update Series	7	375.00	53.57	375.00
Audio Digest Emergency Medicine	3	313.20	104.40	344.56
Audio Digest Family Practice	4	313.20	78.30	344.56
Audio Digest Pediatrics	5	313.20	62.64	344.56
Audio Digest Psychiatry	8	313.20	39.15	344.56
Audio Digest Special Series Internal Medicine	2	313.20	156.60	344.56
Baillieres Best Practice and Research In Clinical Hematology	0	229.75	229.75	238.05
Briefings on JCAHO	3	346.00	115.53	337.00
IUBMB Life	2	750.00	375.00	818.00
Journal of Anesthesia	5	215.00	43.00	215.00
Journal of Peptide Research	4	714.36	178.59	626.91
Journal Watch Audio Cassette	4	299.00	74.75	344.56
MMW: Fortschritte Der Medizin	1	476.00	476.00	476.00
Prostaglandins and Other Lipid Mediator	4	1171.00	292.75	1171.00
Seminars in Anesthesia Perioperative Medicine and Pain	1	191.00	191.00	191.00
Seminars in Urologic Oncology	0	142.00	142.00	153.00
Shock (and supplements)	5	795.00	159.00	795.00

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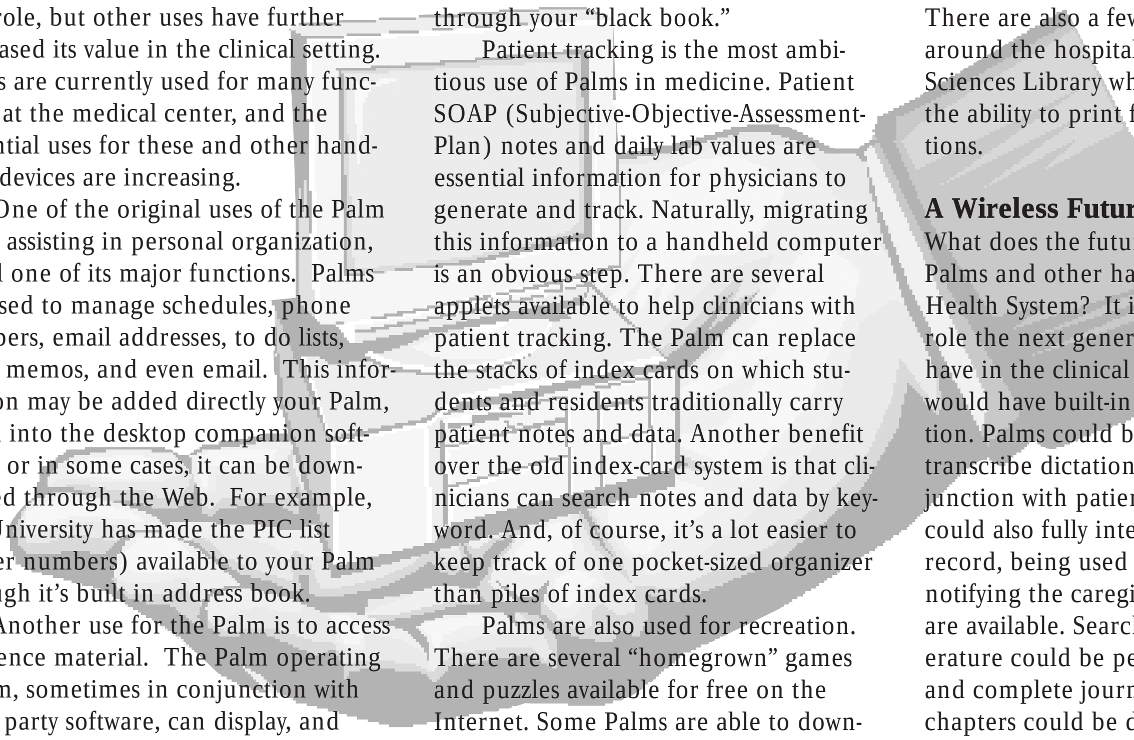
COMPUTING IN THE PALM OF YOUR HAND

Seth Robinson is a 4th year medical student and Palm enthusiast. We recently met with him to discuss his views on Palm computing in the clinical setting.



The functionality of Palm Pilots and other personal digital assistants (PDAs) in the clinical setting has quickly grown. The Palm's original strength as an electronic planner and contact organizer remains its most important role, but other uses have further increased its value in the clinical setting. Palms are currently used for many functions at the medical center, and the potential uses for these and other handheld devices are increasing.

One of the original uses of the Palm Pilot, assisting in personal organization, is still one of its major functions. Palms are used to manage schedules, phone numbers, email addresses, to do lists, short memos, and even email. This information may be added directly your Palm, typed into the desktop companion software, or in some cases, it can be downloaded through the Web. For example, the University has made the PIC list (pager numbers) available to your Palm through it's built in address book.

Another use for the Palm is to access reference material. The Palm operating system, sometimes in conjunction with third party software, can display, and often search, sources such as medical textbooks (*including the Merck Manual, Griffith's Five Minute Clinical Consult*, and much more) drug references, antimicrobial references, and journal articles. Direct OVID searches are not yet available, though this is definitely one of the future tools that will be indispensable.

Using the Palm as an electronic "peripheral brain" is an increasingly popular role the Palms have in the clinical setting. Small pearls of useful information, like how to treat a specific symptom, what key features to look for in a disease, or a pneumonic to remember a specific clinical syndrome can be easily accessed through the Palm. Many of these lists are "homegrown" by current Palm users and are available for download at their personal web sites. Having this information available and searchable on your Palm eliminates the need of having to page through your "black book."

Patient tracking is the most ambitious use of Palms in medicine. Patient SOAP (Subjective-Objective-Assessment-Plan) notes and daily lab values are essential information for physicians to generate and track. Naturally, migrating this information to a handheld computer is an obvious step. There are several applets available to help clinicians with patient tracking. The Palm can replace the stacks of index cards on which students and residents traditionally carry patient notes and data. Another benefit over the old index-card system is that clinicians can search notes and data by keyword. And, of course, it's a lot easier to keep track of one pocket-sized organizer than piles of index cards.

Palms are also used for recreation. There are several "homegrown" games and puzzles available for free on the Internet. Some Palms are able to download Web clippings of news sources using AvantGo, a Palm OS based Web page viewer.

Palms at UVa

Resources for Palm users at the Health System are under development. The Medical School has started a Palmtop Computing Interest Group to share software and ideas to integrate Palm use in their student activities. Seth Robinson, fourth-year medical student, maintains a website dedicated to the use of the Palm in medicine at **http://www.med.virginia.edu/medicine/student-affairs/book-h3.html**. This page identifies helpful resources and applets for your Palm. Support for Palm use in the Health System is under development. Health System Computing Services currently offers users Microsoft Outlook synchronization with personal workstations. There are also a few infra-red printers around the hospital and in Health Sciences Library which allow Palm users the ability to print for some Palm applications.

A Wireless Future

What does the future hold for the use of Palms and other handheld devices in the Health System? It is easy to picture the role the next generation of PDAs could have in the clinical setting. All Palms would have built-in wireless communication. Palms could be used to record and transcribe dictation, especially in conjunction with patient charting. They could also fully interact with the patient record, being used to order tests and notifying the caregiver when the results are available. Searches of the medical literature could be performed on a Palm and complete journal articles and book chapters could be downloaded, read, and "beamed" to colleagues.

Wireless communication is going to have dramatic effect on how we obtain information in the not-too-distant future. In fact, wireless communication, coupled with devices like the Palm, may radically alter the workflow in the hospital. Presently, however, PDAs and wireless communications are in their infancy, even though we expect a rapid maturing to happen in the next two to three years. ■

OVID AND PUBMED: WHAT'S THE DIFFERENCE?

The Health Sciences Library provides access to the MEDLINE database through a web interface produced by Ovid Technologies. MEDLINE can also be searched through PubMed, the National Library of Medicine's web interface. Why are there multiple ways to access MEDLINE? What are the differences between the two versions?

Searching

The Ovid MEDLINE interface offers efficient searching of MEDLINE for both novice and expert searchers. When you type a term into the Ovid Web search box, the system maps it to relevant Medical Subject Headings (MeSH) and allows you to choose the term(s) that best reflect your topic. Using these MeSH terms in your search helps ensure your retrieval is comprehensive and accurate. When you need to increase the precision of your search set, Ovid MEDLINE allows you to "focus" your term and make it the main point of retrieved articles. You can also add subheadings (e.g. diagnosis, therapy) to further narrow your search set.

PubMed performs a mapping process with your search term as well. It maps your search term to MeSH but it also automatically searches your term as a keyword, resulting in an excessively comprehensive search set. It is possible in PubMed to focus your term or add subheadings as with Ovid, but this process requires several additional steps from the main search page.

Content/Currency

With the latest release of Ovid, MEDLINE is now updated weekly. PubMed, however, not only contains the MEDLINE file, but also a database called PreMEDLINE. PreMEDLINE citations are records that are in the process of having MeSH terms added. PreMEDLINE records are added to PubMed daily and significantly increase the currency of PubMed. PreMEDLINE is also available as an Ovid database. It may be searched individually or with MEDLINE using Ovid's **Multifile** searching capability (see below).

	Ovid	PubMed
Searching		
Helps suggest proper MeSH	Yes - gives choices	Yes, behind the scenes
Helps suggest subheadings	Yes	No
Can use Boolean	Yes	Yes
Can combine search sets	Yes	Yes
Can delete search sets	Yes	Yes
Easy to Focus your term	Yes	No
Easy to Limit your Search	Yes	Yes (better now)
Can simultaneously search other databases	Yes - multifile PsycInfo and CINAHL	No
Can find relevant citations	No	Yes
Has Clinical Queries feature	No	Yes
Can save searches	Yes	Yes - Cubby
Can run SDI's and have results emailed to you	Yes - Autoalert	No (PubCrawler)
Has Citation Matcher	No	Yes
Navigation & Display		
Can customize display	Yes (look)	Yes, among choices Show 500
Works with EndNote, RefMan	Yes	Yes
Can Sort citations	Yes	Yes
Can Link to full text	Yes, Journals@Ovid and publisher	Only publisher
Can Link to local holdings	Yes	No
Can Link to evidence based medicine rules	Yes	No
Content		
Currency	Weekly updates	Daily updates
Pre Medline	Must use multifile	Search all at once

Features

The Health Sciences Library's Ovid MEDLINE has several customizations for University of Virginia users. First, MEDLINE records have "Local Holding" messages, which allow you to verify that the Library holds a journal title in one easy step. Also, MEDLINE records are linked to over 70 online, full text, clinical journals through the Library's Journals@Ovid subscription. Lastly, Ovid MEDLINE records are linked to many additional electronic journal subscriptions using Ovid's **OpenLinks** technology.

PubMed also provides links to journals. As of Oct 10, 2000, there were 1192 journals linked into PubMed. However, the links are direct to the electronic publishers and it is not clear from the citatation which titles the Health Sciences Library receives.

Multifile is another Ovid feature, which allows you to simultaneously search MEDLINE with other databases such as CINAHL or PsycInfo. Multifile also allows you to remove the duplicates from your merged search set.

Another Ovid feature is **AutoAlert (SDI)**, which allows you to create a search strategy and have the strategy run automatically in MEDLINE every week, with the results sent directly to your email.

Conclusion

It is useful to understand the similarities and differences between these two interfaces so that you can decide which database suits your particular inquiry and searching style. Although clearly PubMed offers the same basic search functionality as Ovid, it is somewhat cumbersome in its advanced search capabilities. Users accustomed to Ovid's ease in combining search terms, field searching, or attaching qualifiers (subheadings such as diagnosis, etiology, surgery, etc.) and limits (language, date of publication, age ranges, etc.) will find PubMed's Advanced Search mode confusing. Below is a comparison of some the search features available from Ovid and PubMed. ■

THE HEALTH SCIENCES LIBRARY NOW OFFERS SUPPORT FOR ELECTRONIC COURSE MATERIALS

The Health Sciences Library now supports access to electronic course materials for faculty and students of the Health System. All electronic course materials will utilize ITC's Instructional Toolkit system. The Instructional Toolkit is a collection of Web-based tools developed by ITC to help instructors create class home pages and utilize electronic resources to administer and manage courses. Library staff will scan print course materials such as copied articles and book chapters and electronically link them into the Toolkit. In certain cases, when the Library subscribes to the full text online journal as part of its *Journals*@OVID subscription, an OVID Jumpstart link will be created. Jumpstart links are URL connections directly to the full text articles that are part of the Library's subscription to *Journals*@OVID. Jumpstart links are not suitable as electronic reserve links for journals in high demand on *Journals*@OVID. In these circumstances, the Library will handle these requests as regular Toolkit electronic reserve requests.

As a pilot service, the Library will copy, scan and link print materials to course Toolkits at no charge. There is no charge for Jumpstart links to *Journals*@OVID articles.

For more information about scanning and linking course materials, point your browser to **http://hsc.virginia.edu/hs-library/ereserves_procedures.html**. For more information, contact Dan Wilson at 4-0193 or email dtw2t@virginia.edu.

As with print course material, it is the instructor's responsibility to ensure that all materials are in compliance with the University's Copyright Policy. For copyright information concerning the reproduction of class materials see **http://www.lib.virginia.edu/reserve/instructfac.html#copyright**. To learn more about the ITC Toolkit for instructional support, check the Toolkit website at: **http://toolkit.virginia.edu/displaydocs.html**.

WEBCAT ONLINE CATALOG WILL MERGE WITH VIRGO

Beginning in January 2001, the Health Sciences Library will merge its Webcat book and journal catalog into the University Library's Virgo computer system. Rather than having to perform multiple searches of different systems, users will be able to search one catalog to find out if a book or journal is owned by the University Library system, the Health Sciences Library or libraries in the Darden and Law Schools. Since both Virgo and Webcat use the same search interface from the SIRSI Corporation, users of the combined system will experience little change in how they search the new system. Access to other health related databases such OVID and MDConsult will remain unchanged. The Health Sciences Library will continue to maintain all of its own policies such as circulation policies and its fee schedule for services.

The needs of researchers, educators, and students are becoming more interdisciplinary and few libraries, no matter how large, can meet all needs. In addition, the WWW and the explosion of electronic resources available have made geographic barriers disappear. Combining library information from all library systems on Grounds is a similar removal of artificial barriers to accessing information. For those users who want to search only the Health Sciences Library holdings, it will be possible to limit their search to an individual library.

Another bonus is that the Library will be able to take advantage of Virgo's customized features. When fully operational, the expanded Virgo will provide a document delivery link from the online catalog to the Health Sciences Library's document delivery service, similar to the links currently available from Virgo to the University Library's LEO document delivery service. This will allow Health System users the convenience of requesting materials directly from the online catalog.

Look for further information about the expanded Virgo catalog this winter.

THE RACE TO THE INTERNET: IS IT CABLE MODEM OR DSL ?

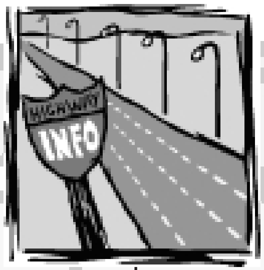
The Narrowband Present

Although touted as an interactive "click-and-go" fest, surfing the World Wide Web is more typically found to be a "click-and-wait" experience due to the limited speeds available through existing dialup modem connections (otherwise known as the "narrowband" in technical circles[*]). Despite this, the number of residential Internet users connecting in this way has managed to grow tremendously — in the 32-34 million range — and is predicted to remain at that level for some time even in the face of the marketing onslaught for broadband connections. A 1999 study by Jupiter Communications, an Internet research company, estimated that by the end of 2000, 35.2 million households will be using dial-up phone modems to connect to the Internet, as opposed to 2.9 million homes using Cable Modem (CM) and 2.2 million using Digital Subscriber Line (DSL) services.

The On-Ramp Crowds Up

Aside from the residential Internet users who seem content to "click-and-wait," there are new users who seek greater accommodation for their needs. These users include institutional/corporate groups, who rely on private networks, and content-providers that offer new services on the Internet. These groups are driving the demand for ever-higher bandwidth access to the Web, the fastest growing section of the Internet.

Many large institutions and corporations are making greater use of the medium to connect remote offices and/or telecommuters to their own little mini-Internets, the *Intra*nets. Greater access speeds could increase their remote workforce's productivity. At the same time, the promise of data security to protect proprietary information often drive this group of users to seek out new digital connections to the Internet.



New Internet content providers also benefit from a higher bandwidth connection. Examples from the work-a-day world include using streaming video, an integral part of such online news services as Reuters, MSNBC, ABC News, to name just a few. In the clinical area, practitioners utilizing telemedicine need greater bandwidth to support the high-resolution images that make remote analysis and decision-making practical. In the face of this need, analog modem technology has hit the end of the road with the 56k generation of devices. Increasing access bandwidth requires a migration to digital modem technologies.

Different Speeds to the Internet

While there are numerous digital approaches in the planning stages, including wireless and satellite technologies, it is generally accepted that the majority of users will get their high-bandwidth access to the Internet through two digital technologies: Cable Modem or Digital Subscriber Link. CM, the first of the two technologies out of the starting gate, theoretically offers data transfer rates up to 10 Megabits per second (Mbps)[1]. Currently, DSL service-providers, which are phone companies such as Sprint, are offering a variety of access rates up to 3.0 Mbps.

CM

With this type of digital modem, the same coaxial cable that is used to deliver cable TV service provides a connection to the Internet. Digital data is compressed and transmitted on special channels reserved for data transmission. In spite of the higher bandwidth that CM's appear to offer over DSL's, there are some very significant limitations to this technology. First, the bandwidth is shared amongst users in a neighborhood because all cables in a given area are connected to each other, called a "multidrop" configuration. This can be a potential speed bump in densely populated areas. Another issue is that unless data is encrypted before it is transmitted, it is vulnerable to interception by others.

DSL

The various forms of this digital technology can send enormous volumes of data at very high speeds using the same type of copper wiring that is used for voice telephone service. In fact, using the typical installation of DSL service, the same line that connects a user to the Internet is also used for voice service using a standard analog phone. However, not all DSL's are created equal: Some types deliver higher speeds or wider bandwidth while others allow higher capacity for downloading data from the Internet than for uploading data. User need determines which form is better.

ADSL

The version of DSL that offers differing download ("downstream" from the Internet) and upload ("upstream") speeds is called an Asymmetric Digital Subscriber Line (ADSL). This can be configured to deliver up to 3 Mbps from the Net to the customer and up to 500 Kbps from the customer back to the Internet, all the while providing voice communication. Compare that with the standard 56k modem and you start to appreciate the difference DSL can make. Since few users access the Internet to send huge documents but all of us use it to access data-intense information such as websites with heavy graphic content, this asymmetric service meets most needs.

SDSL

The umbrella term for the service that offers the same speed upstream (from the Internet) and downstream is Symmetric Digital Subscriber Line (SDSL). Depending on the service-provider, there are a number of implementations over a single (copper) line providing variable rates of symmetric service, with or without ordinary telephone service.

Other DSL's

On the topic of digital access, you may also see mention of HDSL, HDSL-2, VDSL and many more DSL-based acronyms. Whatever the prefix, the message is fundamentally the same: DSL equals point-to-point connection over your existing telephone line for high-speed data and/or voice communications.

This point-to-point connection is a key to speed and to security for data. It means that the user's connection over a DSL service, like the telephone call, is a direct link between the user and the other party. There is no line sharing, as in CM's, to reduce the speed of transmission or to place security of your information at risk.

Is DSL For Me

If your only use of the Internet is to research best buys or check stock quotes, the security issue is probably unimportant. Similarly, if your Internet access is in relatively short bursts and is usually based on simple text information, the sorts of speeds available from DSL services will amaze you and be a bonus, but not a necessity. But if you are dealing with sensitive information, even for email, plugging in to your office or laboratory network from home or while travelling, commercial security is a fundamental requirement. And if you are routinely sending, viewing or downloading dense data—from graphics and photographs to video clips or even PowerPoint presentations and databases—you will probably never be happy until you have caught up to the speed and security of DSL technology.[2] ■

LIBRARY RENOVATION NEWS - WILL IT NEVER END?!?

The Library opened its new front doors on September 25th, completing Phase 3 of a total renovation. We hope you like the results. Phase 4 — the former journal room — has just begun. When complete in mid-January, we will have a beautiful new semi-circular reading room with natural light and elegant furnishings, three additional reading areas, individual study carrels, two more small group study rooms, a revised journal stack layout and new photocopy room. New carpeting, lighting, and heating and air conditioning will complete the transformation. Finally, this spring we will begin renovation of the Cabell Room as Phase 5, with expected completion in the summer. Part of this work will include re-engineering the movable shelves from electric to manual. THEN we'll be done!!!

In the meantime, where are the journals? This phase has required an alphabetic split in our journal collection. Journals beginning with "A" through "Journal of Hypertension" and one photocopy machine are located on the 1st Floor, accessible via the main stairwell. "Journal of Immunological Methods" through "Z" are located in the Cabell Room, as are the books and several copy machines. The Cabell Room is difficult to get to - your best bet is to follow the signs in the LINK at the McKim Connector end of the Library's construction barrier. The signs will lead you down a little-used stairwell and through several sets of doors. We appreciate your patience with the inconvenience.

For continuing updates on construction progress, check our website at: **http://www.med.virginia.edu/hs-library/general/building/building.html**

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* In telecommunications jargon the common prefixes to a signal's bandwidth, narrow and broad, refer to the density of the data: The more dense the data you are sending, e.g. photographs, charts, video images, the wider the bandwidth you need for a quality and speedy transmission.

[1] Adelphi Powerlink is the local provider of Cable Modem service. Sprint through its Digital Subscriber Service, offers four Internet access speeds: The low end of the four allows connections of 512Kbps from the Internet and 128 Kbps to upload to the Internet; the high-end connection is 3.0 Mbps downstream from the Net and 500 Kbs upstream. Both local CM and DSL providers have package deals that include rented digital modems and Internet Service Providers.

[2] For an early assessment of the promise of more bandwidth to the Internet see "Break the Bandwidth Barrier," in Byte, September 1996 [http://www.byte.com/art/9609/sec6/art1.htm]. **Cable Datacom News** [http://cabledatacomnews.com/] is the leading source of reference material on CM'S; for information and subscriber reviews of the various service options DSL technology offers, **DSL Forum** [http://www.adsl.com/] is the place to start.

Double Click

Help celebrate **National Medical Librarians Month** during the **Health Sciences Library's Open House** on Wednesday, October 25th from 11 am to 2 pm. The Open House will showcase the Library' recent renovations and feature demonstrations of the Library's latest electronic resources. Light refreshments will be served.

The **American Medical Informatics Association (AMIA)** will hold its annual meeting in Los Angeles, November 4-8, 2000. The conference presents the world's premier scientific program on computer applications in medical care. The theme of this year's meeting will be "Converging Information, Technology, and Health Care." For registration information see AMIA's website at **http://www.amia.org/meetings/annual/f1.html**.

LIBRARY HOURS

Monday - Thursday	7:30am	- 11:00pm
Friday	7:30am	- 7:00pm
Saturday	9:00am	- 7:00pm
Sunday	11:00am	- 11:00pm
Reference Desk		
Monday - Friday	8:00am	- 6:00pm
Summer	8:00am	- 5:00pm

The extended hours are December 9-17

The annual meeting of the **American Society for Information Science (ASIS)** will be held in Chicago, November 11 - 16, 2000 with the theme "Knowledge Innovations: Celebrating Our Heritage, Designing Our Future." This year's program includes such topics as knowledge management, data mining, electronic books, digital libraries, search engines and browsers, and information-seeking behavior. Registration information is available at **http://www.asis.org/Conferences/AM0/registration.html**

ASIS will also hold a information summit, "Practicing Information Architecture," in San Francisco, February 2-4, 2001. This conference will seek to balance topics that include practical applications of information architecture with the kind of "big- picture-thinking" and debate that characterized the April 2000 meeting. This gathering is an inclusive event, bringing together people from business and academia with a variety of perspectives that include information architecture, human-computer interaction, visual design, experience design, and data usability.

The Health Sciences Library welcomes **Andrea S. Horne**, ash6b@virginia.edu, as the new Learning Resources Center Coordinator. Andrea received her Masters Degree in Information and Library Studies from the University of Michigan and previously held positions in the health sciences libraries at the University of Pennsylvania and also the Medical College of Virginia. As LRC Coordinator, Andrea will be responsible for supporting use of information technology and multimedia in Web based training. Welcome, Andrea!

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HEALTH SYSTEM

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